



PSORIASIS

ELEVATED SELF-DISGUST IN PSORIASIS PATIENTS

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Introduction: Psoriasis is a chronic, immune-mediated skin disease associated with significant psychosocial disability. Previous neuroimaging work by our group suggested that psoriasis patients have an attenuated response to disgust which may represent a coping mechanism of 'blocking out' disgusted facial expressions of others. Little is known about self-reported disgust responses in psoriasis patients and specifically disgust directed to oneself (self-disgust).

Objective: A questionnaire study to explore disgust responses in psoriasis patients.

Materials and Methods: Data were collected from 100 psoriasis patients attending a tertiary psoriasis clinic (55 % female; mean age 45yrs) and 100 age matched (±5yrs) controls. Questionnaires included assessments of disgust processing (Disgust Propensity Sensitivity Scale-Revised [DPSS-R]; Self-Disgust Scale [SDS] comprising 2 subscales: 'ways' (disgust towards behaviour) and 'self' (disgust towards physical self) and mood (Health Anxiety Depression Scale [HADS]; Dermatology Life Quality Index [DLQI] and Perceived Stigmatisation Questionnaire [PSQ]). Psoriasis severity was assessed by Psoriasis Area Severity Index (PASI).

Results: Psoriasis patients (mean 15.93) scored higher than controls (11.52) on HADS (p<0.05) and SDS (psoriasis,34.97; controls,29.43; p<0.05). There was no significant difference in DPSS-R between controls and patients (p>0.05). In psoriasis patients, SDS positively correlated with HADS scores (r=0.66; p<0.01); PSQ (r=0.63; p<0.01) and DPSS-R (r=0.38; p<0.01). The SDS 'self' sub-scale, representing disgust towards physical self, correlated with PASI (r=0.34; p<0.01) and DLQI (r=0.48; p<0.01). DPSS-R correlated with











A new ERA for global Dermatology 10 - 15 JUNE 2019 MILAN, ITALY

DLQI in the patient group (r=0.29; p<0.01).

Conclusions: Psoriasis patients reported higher levels of depression and anxiety than controls with the mean anxiety subscale above the clinical threshold. Elevated levels of self-disgust were also reported by patients, which correlated with disease severity and decreased quality of life. Self-disgust may be an important part of the emotional response to living with psoriasis and more work is needed to explore the utility of emotion-based interventions for patients.



24TH WORLD CONGRESS OF DERMATOLOGY MILAN 2019



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